

Saturday, August 24, 2002 4 23 AM To.

From: Don Johnston

OMB 0851-0032

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	45401-56
First Named Inventor	BALAN, Gabi
COMPLETE IF KNOWN	
Application Number	10 /051 264
Filing Date	January 22, 2002
Group Art Unit	3747
Examiner Name	Not known

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

"HYDROGEN GENERATING APPARATUS AND COMPONENTS THEREFOR"

the specification of which

(Title of the invention)

☐ is attached hereto
OR☒ was filed on

January 22, 2002

as United States Application Number or PCT International

Application Number 10/051,264 and was amended on (MM/DD/YYYY) (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365 (b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto

DECLARATION – Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.59 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (If applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached

As a named inventor, I hereby appoint the following ☐ (registered practitioner(s)) to prosecute this application and to transact all business with the Patent and Trademark Office connected herewith: ☐ (Customer Number 222332323) OR Registered Practitioner(s) name and registration number listed below

Name	Registration Number	Name	Registration Number
ROSEANN B. CALDWELL	37,077		
JEFFREY T. DAINES	41,540		
EDWARD YOO	41,435		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code Label ☐ OR ☐ Correspondence address below

Name	Ms. Roseann B. Caldwell				
Address	BENNETT JONES LLP				
Address	4500, 835 - 2nd STREET S.W.				
City	CALGARY	State	AB	Zip	T2P 4K7
County	CANADA	Telephone	(403) 298-3881	Fax	(403) 268-7218

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001; and that such willful false statement may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor:

Given Name (first and middle (if any))	Family Name or Surname
GABI	BALAN

Inventor's Signature: *G. Balan* Date: August 25, 2002

Residence: City: DUNMORE State: AB County: CANADA Citizenship: Canadian

Post Office Address: PO Box 272

Post Office Address:

City: Dunmore State: AB Zip: T0J 1A0 Country: Canada

☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Saturday, August 24, 2002 4:23 AM

To

From: Don Johnston,

276-2706

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DECLARATION

ADDITIONAL INVENTOR(S)

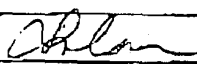
Supplemental Sheet

Page ___ of ___

Name of Additional Joint Inventor, if Any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))					Family Name or Surname				
JOHNSTON					DONALD				
Inventor's Signature		<i>Donald A. Johnston</i>			Date:		August 24, 2002		
Residence: City	Calgary	State	AB	Country	Canada	Citizenship	Canadian		
Post Office Address		155 Ventura Way N.E.							
Post Office Address									
City	Calgary	State	AB	Zip	T2E 0H3	Country	Canada		
Name of Additional Joint Inventor, if Any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))					Family Name or Surname				
BALAN					DANIELA				
Inventor's Signature					Date				
Residence: City		State		Country		Citizenship			
Post Office Address									
Post Office Address									
City		State		ZIP		Country			
Name of Additional Joint Inventor, if Any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))					Family Name or Surname				
ALDEA					EUGENE				
Inventor's Signature					Date				
Residence: City		State		Country		Citizenship			
Post Office Address									
Post Office Address									
City		State		Zip		Country			

DECLARATION

ADDITIONAL INVENTOR(S)
 Supplemental Sheet
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Name of Additional Joint Inventor, if Any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
DONALD				JOHNSTON			
Inventor's Signature				Date			
Residence: City	CALGARY	State	AB	Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	
Name of Additional Joint Inventor, if Any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
DANIELA				BALAN			
Inventor's Signature				Date		August 25, 2002	
Residence: City	DUNMORE	State	AB	Country	CANADA	Citizenship	Canadian
Post Office Address		PO Box 272					
Post Office Address							
City	DUNMORE	State	AB	ZIP	T6J 1A0	Country	CANADA
Name of Additional Joint Inventor, if Any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
EUGENE				ALDEA			
Inventor's Signature				Date			
Residence: City	CALGARY	State	AB	Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	

DECLARATION
ADDITIONAL INVENTOR(S)
 Supplemental Sheet
 Page 6 of 7

Name of Additional Joint Inventor, if Any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Mario Phillip				De Souza			
Inventor's Signature				Date		August 24, 2002	
Residence: City	DUNMORE	State	ALBERTA	Country	CANADA	Citizenship	Canadian
Post Office Address		Box 134					
Post Office Address							
City	Dunmore	State	Alberta	Zip	T0J 1A0	Country	Canada
Name of Additional Joint Inventor, if Any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if Any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	